

(FAX):

2. Child's name Age Date of birth Sex

Date: _____

JUDICIAL OFFICER OF THE JUVENILE COURT

3. The following information is available:

<u>Child's name</u>	<u>Name of father</u> <i>(including alleged fathers, if any)</i>	<u>Date of order</u>	<u>Docket No.</u>	<u>determining paternity</u>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

☐ Certified copies of court orders attached.

4. ☐ Paternity was established by voluntary declaration on (date):

Date: _____ District Attorney, by _____, Deputy